APPLICATION FOR RECREATIONAL VEHICLE

Bayfield County Planning and Zoning Department P.O. Box 58 117 East Fifth Street Washburn, WI 54891 Phone - (715) 373-6138



INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Office Use:	
Zoning District/Lakes Class Application No.	R1/3
Date	75.02 Priv
TBA \$ 175.00	12.18.0
classit	विचिष्ठची भिष्

Changes in plans must be approved by the Zoning Department	
Mailing Address N 4863 116965 56	Property Address Allison's Acres Lot 6 of RV placement.
Prescopt 100 54/021	Agent:
Telephone 651-388-5749	Written Authorization Attached: Yes () No ()
Accurate Legal Description involved in this request:	
1/4 of1/4 of Section <u>Q /</u> Township <u>47</u> N. I	Range 8 W. Town of Iran River
Gov't Lot Lot Block Subdivision Alliy 6	ins Acres csm#
Volume Page of Deeds Parcel I.D. # <u>/9</u> 6 Additional Legal Description: エル り 0 C 2 O 2)火	Acreage 3. 77
	ATTACH Copy of Tax Statement
Is your RV in a Shoreland Zone? Yes W No 🗆 If Yes, Distance	from Shoreline: 75' or greater 4 < 75' to 40' \(\text{less than 40'} \(\text{less than 40'} \)
RV: New □ Replacement ☑ <u>Year</u> : <u></u>	1002 Vin #: 1NLIYFR 2521059279 OF RV: Yellowstone
Make of RV: Inv bruds Model of	of RV: Yellowstone

FAILURE TO OBTAIN A PERMIT or PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES

APPLICANT - PLEASE COMPLETE REVERSE SIDE

	For Office Use Only	Zoning District/Lakes Class: R1 1 3
Permit Issued:	Sanitary Number _	Date
Issuance Date 12-28-21	Permit Number <u>21-04/2</u>	Permit Denied (Date)
Reason for Denial:	LASSET SPACE	
Inspection Record: Met own	er on site after he perche. By Todd Norword Date of	sed property Appears code compliant finspection April 2021 & Summer 202
Variance (B.O.A.) #		
	to 4 months from issuance date. Mus	st be removed by:
	Signed God Worwerd Inspector	Date of Approval

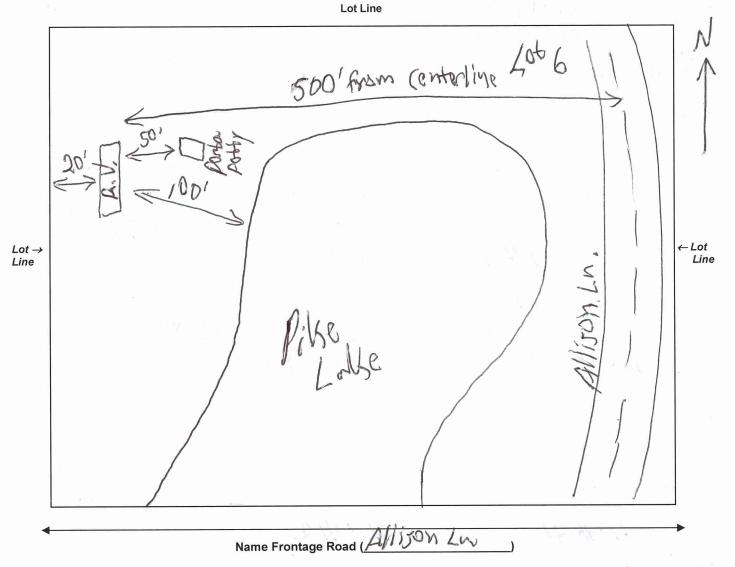
- 1. Name and use frontage road as a guideline, and indicate North (N) on plot plan
- 2. Show the RV (Recreation Vehicle) location

IMPORTANT Detailed Plot Plan is Neccessary

- 3. Show dimensions in feet on the following:
 - a. RV from centerline of road(s).
 - b. RV from right-of-way line

- d. RV from lake, river, stream or pond
- e. RV from Privy

c. RV from property lines



NOTICE: The local town, village, city, state or federal agencies may also require permits.

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection,

Owner or Authorized Agent	Roberd G. Toberall	Date April 17
Address to send permit	N4863 1169 50. Pregwood	WI 54021

TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

Residence in Ag-1 or F-1; Shoreland Grading; Short-Term Rental (1 unit); Signage; RV Ext

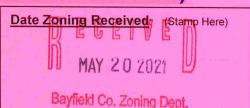
When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 – Washburn, WI 54891 Phone – (715) 373-6138 Fax – (715) 373-0114

Revised: August 2018

u/forms/townboardrecommendation-ClassA

Website: www.bayfieldcounty.org/147



Fax – (715) 373-0114 www.bay e-mail: zoning@bayfieldcounty.org

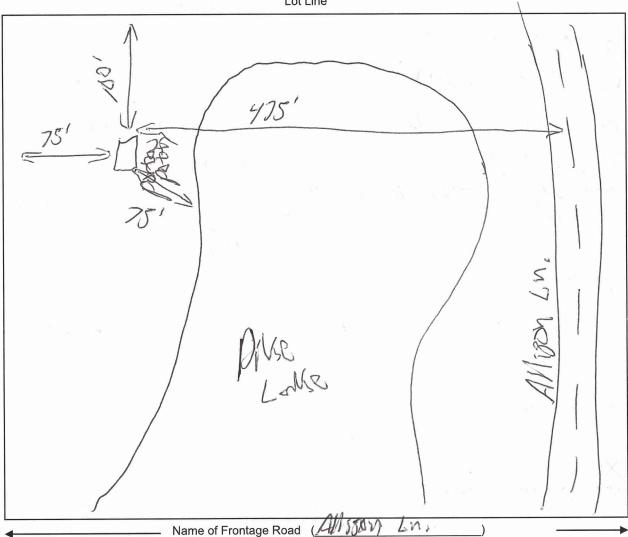
roperty Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s). Contractor Property Address Authorized Agent Agent's Telephone Telephone Written Authorization Attached: Accurate Legal Description involved in this request (specify only the property involved with this application) _ 1/4 of _____ 1/4, Section 21, Township 47 N., Range 8 W. Town of 2ron Block ___ Subdivision Allifors Haves Volume _____ Page ____ of Deeds Tax I.D# Additional Legal Description: Zoning District: Applicant: (State what you are asking for) Lakes Classification We, the Town Board, TOWN OF Iron Kiver , do hereby recommend to ☐ Table Approval Disapproval Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: Yes ☐ No Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval) Signed: ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: Chairman: The Tabled, Approval or Disapproval box checked Supervisor: The Town's reasoning for the tabling, approval or disapproval The form returned to Zoning Department not a copy or fax Supervisor: ** NOTE: Supervisor: Receiving Town Board approval, does not allow the start Clerk: of construction or business, you must first obtain your permit card(s) from the Planning and Zoning Department.

\$150.00 5-7-21

APR 2 2 2021 BAYFIELD COUNTY SANITARY PERMIT APPLICATION

Zoning District	RI
Lakes Class	3

I. APPLICATION IN (Please Print All Info	ormation)			Soil Test No:			unty mit No:			
Property Owner's Na	b. Tute	Holden		County:	1		Bayfie	eld		
Address of Property:	Acres L	d do.		Property L		3) T	47 N, I	R 😤	E	E (or) W
N 4863 //	ailing Address:			Township		276-1	Gov. Lot #:			
City, State (1)			one Nui	mber Lot# E	Block #: C	SM #: C	CSM Doc#		vision Na	
State Owned Public (Explain the use/purpose) Tax ID#:										,
III. TYPE OF PERM	velling - No. of Bed IT: (Check only or			k box on line B, if	applicable)	L. Rein:			61 18 250	
A)	□F	Replacement	□ c	County Private Inte	rceptor					
Reconne	ection	Repair	□ R	evision ** [Transfer	of Owner (List Previo	us Owr	er below	′)
B) A Sa	anitary Permit was	previously issu	ued. <i>Pre</i>	evious Permit Nu	 mber:	Da	te Issued:			_
IV. TYPE OF NON-								filled ou	ut above	
C) Dit Priv				gallons or		\				
N Portabl	e Privy 🔲 Ca						п.,			
V. ABSORPTION S			Offic Co	oritainei	Composting	Jiollets	Incir	nerating	lollet	
1. Gallons 2. A	bsorp. Area equired (Sq.Ft.)	3. Absorp. An Proposed (Sc		4. Loading Rate (Gals. / Day / Sq.		erc. Rate lin. Inch)	6. System Elev.(F		7. Final Elev. (
VI. TANK INFORMATION:	Capacity In Gallons New Existi Tanks Tank	0	# of Tanks	Manufacturer's Name	Prefab. Concrete	Site Constructe	ed Steel	Fiber - glass	Plastic	Exper. App.
Septic Tank or Holding Tank	Tanks Tank	.5		Drightus said	3518.000	tort includ	If an and a second	3,,,,,		
Lift Pump Tank / Siphon Chamber	12 may 1 1 8 1 8	F 7		DIBLETON.	105 MHS1	uo ne		State of Mar	The second second	
VII. RESPONSIBILI					9112	Pasi Vili	la musco	-1-	Chellis II	
I the undersigned, as	sume responsibili	ty for installation	n of the					, -i	102	-
Owner's Name(s): (Tubens	Section C above		Owners	Signature(s): (No Star	mps)			
Plumber's Name: (P	rint) If applying for Se	ection A or B) abov	e P	Plumber's Signatur		/	MP/MP	RSW N	o:	
Plumber's Address:	(Street, City State	, Zip Code)	1	Home Pho	one:	ngen. Senten mada	Busines	ss Phon	e:	
VIII. COUNTY / DEF						in The	120 01 02 15	(Page)	79 - 11	0.00
Approved	DisapprovedOwner GivenAdverse Deter	Initial	nitary P	ermit/Transfer Fed	e: Date I	ssued:	Issuing Age			
IX. CONDITIONS O	F APPROVAL / R	EASONS FOR				Link of the	Toddk			
No pressur	zed water	r shall	ente	· Rv or b	eture.	Struct	vres w	Hion	it an	
No pressuriapproved or	nnection &	o a pern	r. He	d septics y	stem. f	Portable	must	be	pompe	ol
Py a 110	maca sep	in chaon	1 0	TVII,		1_	h o in dhi	Plot	Plan on re	verse side



- Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N). 1.
- Show the approximate location and size of the building. 2.
- Show the location of the well, septic tank and drain field. 3.
- Show the location of any lake, river, stream or pond if applicable. 4.
- Show the approximate location of other existing structures. 5.
- Show the approximate location of any wetlands or slopes over 20 percent. 6.
- 7. Show dimensions in feet on the following:
 - a. Building to all lot lines
 - Building to centerline of road
 - c. Building to lake, river, stream or pond
 - d. Septic / holding tank to closest lot line
 - e. Septic/holding tank to building
 - Septic / holding tank to well f.
 - Septic / holding tank to lake, river, stream or pond
 - Privy to closest lot line

- Privy to building
- Privy to lake, river, stream or pond
- Drain field to closest lot line
- Drain field to building
- m. Drain field to well
- Drain field to lake, river, stream or pond

IMPORTANT

DETAILED PLOT PLAN

IS NECESSARY, FOLLOW

STEPS 1-7 (a-o) COMPLETELY

Well to building Ο.

Submit To: Bayfield County Zoning Department, PO Box 58, Washburn, WI 54891

PORTABLE RESTROOM SERVICING CONTRACT

Contract Date: 202

Bayfield Co. Zoning Dept.

This contract is made between the

Portable Restroom Owner(s) Name(s):	Pumper's (Service Provider) Name: # 2 Septic Pumping & Excavating Inc 50181 State Hwy 13 Ashland W1548)
We acknowledge the placement of a D. () !	3.112.43.10

dge the placement of a Portable Restroom on the following property:

PROJECT LOCATION	Legal <u>De</u>	scription: (Us	e Tax Statement)	Tax ID#	633		EVE SELLE		
1/4,	Menta di Ta	of Section	21 , Township	47 N, Rar	nge _ 8	w	Town of: River	Lot Size	Acreage 3 77
Gov't Lot	Lot#6	CSM#	Vol. Page	CSM Doc#	Lot(s)#	Block(s) #	Subdivision:	onet	00//

- 1. The owner agrees to file a copy of this contract with the Bayfield County Planning and Zoning Dept. as required in Title 15 of the Bayfield County Zoning Ordinance.
- 2. The owner agrees to have the Portable Restroom serviced by the pumper and guarantees to permit the pumper to have access and to enter upon the property for the purpose of servicing the Portable Restroom. The owner agrees to maintain the access road or drive so that the pumper can service the Portable Restroom with the pumping equipment. The owner further agrees to pay the pumper for all charges incurred in servicing the Portable Restroom as mutually agreed upon by the owner and pumper.
- 3. The pumper whom has signed the pumping agreement agrees to submit the agreement to the local government unit (Bayfield County Planning and Zoning Dept.) as required by Title 15 of the Bayfield County Zoning Ordinance, a report for the servicing of the Portable Restroom on an annual basis. The pumper further agrees to include the following in the annual report:
 - a. The name and address of the person responsible for servicing the Portable Restroom;
 - b. The name of the owner of the Portable Restroom;
 - c. The location of the property on which the Portable Restroom is installed;
 - d. The dates on which the Portable Restroom was serviced;
 - e. The volumes in gallons of the contents pumped from the Portable Restroom for each servicing;
 - The disposal sites to which the contents from the Portable Restroom were delivered.
- This agreement will remain in effect until the owner or pumper terminates this contract. In the event of a change in this contract, the owner agrees to file a copy of any changes to this service contract and/or a copy of a new service contract with the local government unit (Bayfield County Planning and Zoning) named above within (10) business days from the date of change to this service contract.

Owner(s) Name(s) (Print) Richard G. Tudkund	Owner's Signature(s)	Subscribed and sworn to me on this date:
Pumper's Name (Print) # 2 Septic	Pumper's Signature	CAROL J ARNT Notary Public Signature NOTARY PUBLIC MINNESOTA
Pumper's Registration Number		My Commission Expires 01/31/2025 /- 31-3 0 2 5 Commission Expiration

Real Estate Bayfield County Property Listing

Today's Date: 12/21/2021

Property Status: Current

Created On: 3/15/2006 1:15:34 PM

Description

Updated: 2/2/2021

Tax ID: PIN:

19633

04-024-2-47-08-21-4 00-327-60000

Legacy PIN:

024105803006

Map ID:

STR:

Municipality:

(024) TOWN OF IRON RIVER

S21 T47N R08W

Description: ALLISON'S ACRES LOT 6 IN DOC 2021R-

586514

Recorded Acres: Calculated Acres: Lottery Claims: First Dollar:

3.770 3.255 0 No

Zoning:

(R-1) Residential-1

ESN:

118

J	Tax	E
***********	***************************************	-
-		

Districts Updated: 3/15/2006 1 STATE 04 COUNTY 024 TOWN OF IRON RIVER 163297 SCHL-MAPLE 001700 **TECHNICAL COLLEGE**

Recorded Documents

Updated: 3/15/2006

WARRANTY DEED

Date Recorded: 1/15/2021 2021R-586514

QUIT CLAIM DEED

Date Recorded: 6/17/2020 2020R-582664

CONVERSION

Date Recorded: 493189 172-2;523-189

PLAT

Date Recorded: 7/27/2004 2004R-493189

Grantee: JULIE MELLUM

Sale Price: 0 0 Acres Ownership

Updated: 2/2/2021

RICHARD G TUTEWOHL

PRESCOTT WI

Billing Address: RICHARD G TUTEWOHL

N4863 1169TH ST PRESCOTT WI 54021 **Mailing Address: RICHARD G TUTEWOHL**

N4863 1169TH ST PRESCOTT WI 54021

Site Address

* indicates Private Road

N/A

Property Assessment	Updated: 8/2/20				
2021 Assessment Detail			THE BUILDING COLORS COLORS AND		
Code	Acres	Land	Imp.		
G1-RESIDENTIAL	3.770	47,900	0		
2-Year Comparison	2020	2021	Change		
Land:	47,900	47,900	0.0%		
Improved:	0	. 0	0.0%		
Total:	47,900	47,900	0.0%		



Property History

N/A

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X (Shoreland)
SANITARY - X (Privy)
SIGN SPECIAL - Class A
CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	21-0412		Is	sued To:	Richard G	lutewohl				
Gov.t L	ot L	.ot	6	Block	(Subdivision	Allison	's Acres	CSM#	
For: I	Recreational Vehicle	(RV	')	and P	rivy (Portab	le)				
	Innsbruck Mode imer): Any future expansi			wstone velopment v		INLIYFR252 ditional permitting.		Year:	2002	
Condition	Condition: May not be used for permanent residence. No pressurized water shall enter RV or future structures without an approved connection to a permitted sanitary system. Portable Privy must be pumped by a licensed septic hauler when full.									
								Todd N	lorwood, AZ	A
NOTE:	This permit expires one year work or land use has not be		n da	e of issuanc	e if the authorized	d construction —		Authoriz	ed Issuing Offic	cial
	Changes in plans or specific	cation	s sh	all not be ma	nde without obtain	ing approval.				
	This permit may be void or to have been misrepresented				•	tion is found		Decem	nber 28, 202	I
	This permit may be void or completed or if any prohibite					are not			Date	-

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfie County
Planning and Zoning Depart.
PO Box 58

Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

RECEIVED

SEP 1 4 2021

Permit #:	21-04/3 1100
Date:	12-29-21
Amount Paid:	160-9-142/
Other:	dat
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made				Department.	Bayfiel	d Co.	al Application N	1UST be submitte	d FILL	OUT IN IN	ık (NO	PENCIL)	
TYPE OF PERMIT			■ LANE		V Idiliani		ONDITIONAL US		- Innervan		OTHER		
Owner's Name:	-11	estr	eiten	Mailing 875	Address: Brunsu //State/Zip:	na	/ 10 / Ci	ity/State/Zip:	W.[5	9548	Telephon (115)6 Cell Phon	14-0983	
mail: (print clea	arly) W	ate	rwo	195 layer	tor Phone:	m	Plumber:	m			Plumber	Phone:	
Authorized Agent Owner(s))	: (Person Sign	ing Applica	ation on behalf	of Agent P	hone:		Agent Mailing Ad	dress (include City/St	ate/Zip):			Authorization of (for Agent)	
PROJECT LOCATION	Legal Descr	iption:	(Use Tax Sta		208	2 <i>C</i>)	R	ecorded D	ocument: (S		wnership)	
1/4,	1/4	Gov	't Lot	Lot(s) CSM	Vol & Page C. 1	22°	C# Lot(s) #	Block # S	ubdivision Ellenn	:	Esta	ites	
Section 2	Townsh				Town of:	10	nRiver	^	ot Size '	ore Lain	Acrea	2,65	
Shoreland	Creek o	r Landwa	ard side of F		escontinue —			cture is from Shorel	_ feet	in Flood Zone	lain	Are Wetlands Present?	
☐ Non-	II Is Pro	perty/La	nd within 1	000 feet of Lake, Pool If y	nd or Flowage rescontinue —	→	Distance Struc	cture is from Shorel	ine : feet	□ Ye		☐ Yes ➤ No	
Shoreland						-		l deleration and the second	*				
Value at Time of Completion * include donated time & material	Project			Project # of Stories				bedrooms Sewer			What Type of r/Sanitary System(s) on the property or oe on the property?		
	New	Constru	uction	1 -Story	☐ Basemen	t	□ 1	☐ Municipal/C				□ City	
\$12,000	□ Addi	tion/Al	teration	☐ 1-Story + Loft	☐ Foundation	on	□ 2	ary Speci	□ Well				
	□ Conv			□ 2-Story	□ Slab	•	□ 3	☐ Sanitary (Exi				None	
		a Busine	sting bldg) ess on	<u> </u>	Use	3	None	☐ Privy (Pit) ○ ☐ Portable (w/			200 gallo	<u>n)</u>	
	Prop	erty	,	. Y .	≪ Year Rou	nd		☐ Compost To			7.		
		-						☑ None					
Proposed Con				siness is being applied ns)	for) Length Length	Special Contract of the Contra	584	Width: 4PF		Heig Heig		ft	
Proposed	l Use	1			Proposed S	truct	ure		Di	mensions		Square Footage	
				Structure (first st		perty)		(X)		
157			Residenc	e (i.e. cabin, hunti with Loft	ng shack, etc.)				(X)		
▼ Resident	ial Use			with a Porch			i.		(X)		
				with (2 nd) Porc	h				(Х)		
				with a Deck with (2 nd) Deck	,				(X)		
Commer	cial Use			with Attached					+	X)		
			Bunkhou	se w/ (□ sanitary, g	or sleeping qu	ıarter	s, <u>or</u> \square cooking &	food prep facilities)	(Х)		
				lome (manufactured					(Х)		
☐ Municipa	al Use		Addition	/Alteration (explain	n)				(Х)		
				y Building (explain)					(Х)		
				y Building Additio					(X)		
									(X)		
		<u> </u>		nal Use: (explain) _ xplain)	L. 001055		ck on lak		100	X)	766 11	
(are) responsible for result of Bayfield Coproperty at any reason owner(s):	r the detail and ounty relying or sonable time for	(including a accuracy of a this inform	FAILURE TO ny accompanyir i all information nation I (we) arr se of inspection	OBTAIN A PERMIT or S g information) has been ex I (we) am (are) providing ar I (are) providing in or with t	TARTING CONSTRU amined by me (us) and nd that it will be relied this application. I (we)	CTION to the upon by consens	WITHOUT A PERMIT best of my (our) knowle y Bayfield County in det t to county officials chai	WILL RESULT IN PENA dge and belief it is true, co ermining whether to issue ged with administering co	rrect and con a permit. I (v unty ordinand	ve) further acco	ept liability vess to the ab	which may be a	
Authorized Ag		ng on b	ehalf of th	e owner(s) <mark>a lette</mark>	r of authorizati	on m	ust accompany	(See Note below) this application)	Date	e			
Address to sen			6-107%			# -		If you recently pur		Atta			
								, , , , , ,			, , , , , , ,		

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of:(2) Show / Indicate:

of: Proposed Construction North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(3) Show Location of (*):(4) Show:

(*) **Driveway** <u>and</u> (*) **Frontage Road** (Name Frontage Road) All **Existing Structures** on your Property

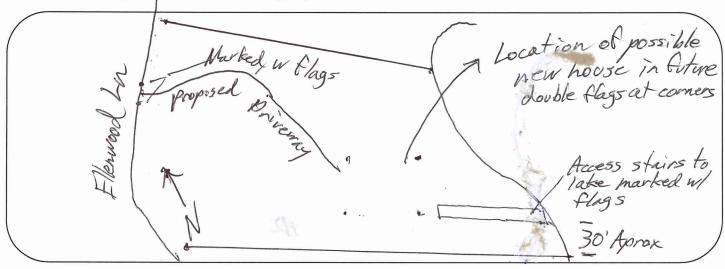
(5) Show:(6) Show any (*):

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	400 300 Feet	Setback from the Lake (ordinary high-water mark)	
Setback from the Established Right-of-Way	380 2977 Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	165 Feet		
Setback from the South Lot Line	30 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	400 300 Feet	20% Slope Area on the property	Yes 🗆 No
Setback from the East Lot Line		Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet	SCLUDEN TO WELL	reet
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

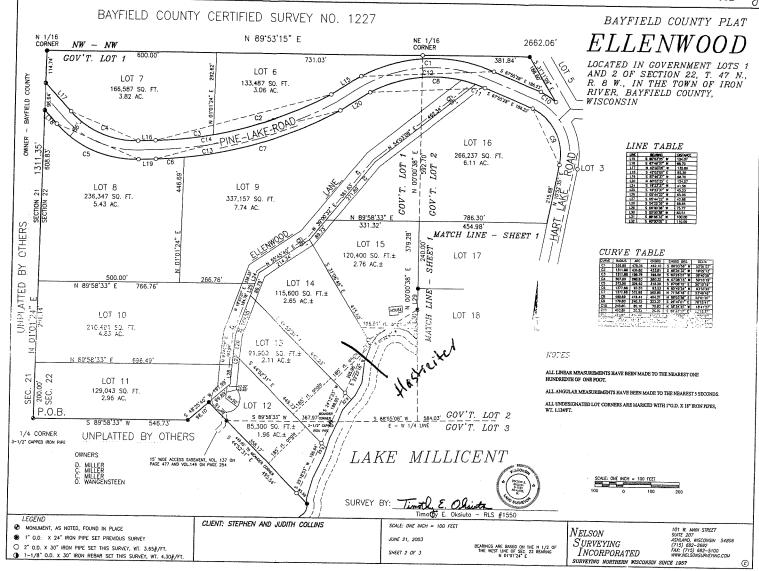
For the Construction of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

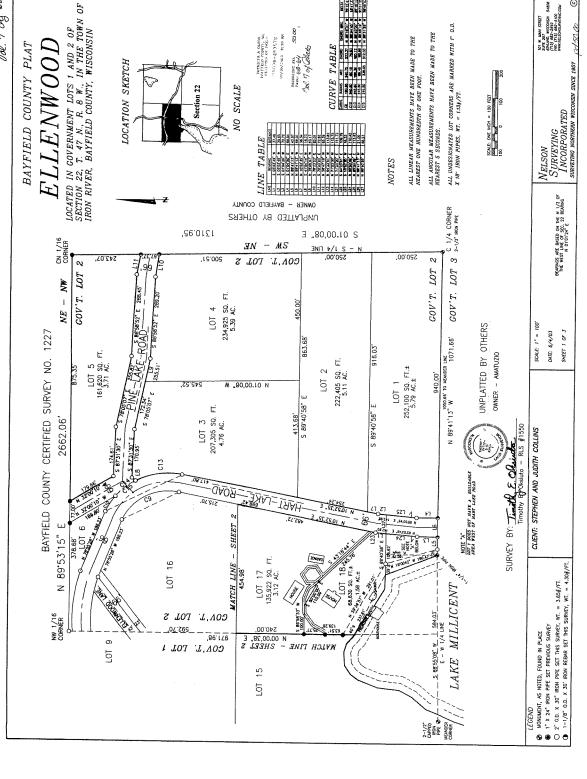
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	None	# of bedrooms:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:							
Permit #: 2/4/3	Permit Date: 7-26-21							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Reco Yes Ye	uous Lot(s)) 🔲 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Service No No				
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:						
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No		Were Property Line	Yes					
Inspection Record: Sike flagged of	end appears way needs engi	lode lomp new review.	pliant.	Zoning District (R) Lakes Classification ()				
Date of Inspection: 10 -29 - 21	Inspected by:	Ed Nowwoo	Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Atta	ached? Yes No - (If	2 (a)(5)(a)	of the Bayt	ield County Zoning pro mengineered reviewed				
Proposed driveway to access Plan subm. Hed to Bayfield Co management that ces to pre Signature of inspector:		it elosion a	nd Sed ments	Date of Approval.				
Hold For Sanitary: Hold For TBA:		davit:	Hold For Fees:	12-32-				





Bayfield County, WI



Real Estate Bayfield County Property Listing

Today's Date: 12/22/2021

Property Status: Current

Created On: 3/15/2006 1:15:37 PM

Description

Tax ID:

20820

04-024-2-47-08-22-2 00-323-14000

Updated: 5/10/2021

Updated: 8/20/2009

2009R-528129 1023-490

PIN: Legacy PIN:

024117802014

Map ID:

Municipality:

(024) TOWN OF IRON RIVER

STR: Description: S22 T47N R08W

PLAT OF ELLENWOOD LOT 14 IN DOC 2021R-588508

Recorded Acres:

2.650 Calculated Acres: 2.638 Lottery Claims: 0

First Dollar:

No Zoning:

ESN:

(R-1) Residential-1

118

Tax Districts Updated: 3/15/2006 1 STATE 04 COUNTY 024 TOWN OF IRON RIVER 163297 SCHL-MAPLE 001700 TECHNICAL COLLEGE

Recorded Documents

WARRANTY DEED Date Recorded: 5/4/2021 2021R-588508

WARRANTY DEED

Date Recorded: 8/7/2009

Ownership

Updated: 5/10/2021

GORDON T & TRESSA J HASTREITER

MINOCQUA WI

Billing Address: GORDON T & TRESSA J HASTREITER

8756 BRUNSWICK ROAD MINOCQUA WI 54578

Mailing Address: GORDON T & TRESSA J HASTREITER

8756 BRUNSWICK ROAD MINOCQUA WI 54578

Site Address

* indicates Private Road

N/A

Property Assessment		Updated: 8/31/2010				
2021 Assessment Detail	description of the latest debter and the latest description of the lat					
Code	Acres	Land	Imp.			
G1-RESIDENTIAL	2.650	129,000	0			
2-Year Comparison	2020	2021	Change			
Land:	129,000	129,000	0.0%			
Improved:	0	Ó	0.0%			
Total:	129,000	129,000	0.0%			



Property History

Town, City, Village, State or Federal **Permits May Also Be Required**

LAND USE - X (Shoreland) SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	21-0413 Issued To: Gordon & Tressa Hastreiter												
Location:	1/4	of	1/4	Section	22	Township	47	N.	Range	8	W.	Town of	Iron River
Gov't Lot		Lot	14	Blo	ock	Su	bdivisio	on P l	at of Ell	enw	/ood	CSM#	
Residentia													

For: Other: [Stairs to the Lake]; $(75' \times 4') = 300 \text{ sq. ft.}$ Height of 6'

(Disclaimer): Any future expansions or development would require additional permitting

Condition(s): Stairs must conform to Sec 13-1-22(a)(5)(g) of the Bayfield County Zoning Ordinance. Proposed driveway to access property (and build stairs) must have an engineered reviewed plan submitted to Bayfield County Planning and Zoning prior to start of driveway construction. Must use best management practices to prevent and limit erosion and sedimentation on driveway and stairs. Revegetate all disturbed areas following construction.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood, AZA

Authorized Issuing Official

December 28, 2021

Date